COME	BINED	DE	CLARATIC	ON A	ND	POWER	OF	ATTORNEY
FOR	PATEN	IT	APPLICAT	CION	ſ			

FOR PATENT APPLIC	<u>ATION</u>		
		Docke	et No. <u>6661</u>
As a below named	inventor, I he	ereby declare that:	
My residence, Mai next to my name.	ling Address a	and citizenship are	as stated below
name is listed be (if plural names claimed and for w	low) or an ori are listed bel hich a patent	rst and sole invent ginal, first and jo ow) of the subject is sought on the in	oint inventor matter which is nvention
IN AQUEOUS SYS	TEMS		
the specification following box is		attached hereto unle	ess the
[X] was filed on	17 July 2005	as United States	Application
Number or PC	T Internationa	al Application Number	er <u>PCT/CH2003/00482</u>
and was amen	ded on	(if app	licable).
	tified specifi	ewed and understand cation, including to red to above.	
I acknowledge the to patentability		lose information who	ich is material
(d) or §365(b) of inventor's certifapplication which United States, lichecking the box, inventor's certifapplication which checking the box, inventor's certifapplication.	any foreign a ficate, or §365 designated at sted below and any foreign a ficate, or PCT	benefits under 35 application(s) for position (s) for position (s) for position (s) for position for paternation application on which a	patent or ernational other than the ied below, by ent or ication having a
Prior Foreign App	olication(s)	<u>:</u>	Priority Claimed
PCT/CH2003/000482 (Number)	PCT (Country)	17 July 2003 (Day/Month/Year Filed)	Yes [X] No []
(Number)	(Country)	(Day/Month/Year Filed)	Yes [] No []

(Day/Month/Year Filed)

(Country)

Yes [] No []

(Number)

COMBINED DECLARATION	& POWER OF ATTORNEY	<u>Y</u> Docket 1	No. <u>6661</u>			
I hereby claim the be States provisional a			f any United			
(Application Number)	(Filing	g Date)				
(Application Number)	(Filing	g Date)				
I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.						
(Application No.)	(Filing Date)	(Status-patented, po	ending, abandoned)			
(Application No.)	(Filing Date)	(Status-patented, pe	ending, abandoned)			
I (we) hereby appoint the following attorney with full power of substitution to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:						
THEODORE A. BREINER, No. 33,161; and	Reg. No. 32,103; MA JENNIFER A. PULSINE	ARY J. BREINE ELLI, Reg. No	R, Reg. . 52,139.			
Address all correspondence to -						
BREINER & BREINER, L.L.C., P.O. Box 19290, Alexandria, Virginia 22320-0290						

Mary J. Breiner at (703) 684-6885

Having Customer No. 006858

Address all telephone calls to -

COMBINED DECLARATION & POWER OF ATTORNEY

Docket No. 6661

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole or First Inventor: (given name, family name) Kenneth J. F	
Inventor's Signature texter 1	_ Date
Residence: <u>Haslemere, Great Britain</u> Ci	itizenship: <u>Switzerland</u>
Mailing Address: Oak Combe Marley Common	n, Haslemere GU27 3PT
Great Britain	
Full Name of Second Joint Inventor, if ar (given name, family name)	
Inventor's Signature	Date
Residence:	_ Citizenship:
Mailing Address:	
Full Name of Third Joint Inventor, if any (given name, family name)	Y
Inventor's Signature	_ Date
Residence:	_ Citizenship:
Mailing Address:	